



Municipal Police Training Committee

New Contract Employee Checklist – Please print all forms **single sided** and mail originals (**wet ink**) along with the checklist to: MPTC Headquarters, 42 Thomas Patten Drive, Randolph, MA 02368 Attn: Fiscal Department.

| EMPLOYEE INFORMATION | |
|----------------------|--|
| Full Name: | |
| Address: | |
| Home Phone: | |
| Cell Phone: | |
| Email Address: | |

| CHECKLIST | | |
|--------------------------|--|--|
| <input type="checkbox"/> | FY22-FY24 MPTC Standard Contract Form | Complete, Sign and Return |
| <input type="checkbox"/> | Instructor Contract Addendum September 1, 2021 | Read only |
| <input type="checkbox"/> | Commonwealth of MA Terms and Conditions | For Your Review – Do Not Return |
| <input type="checkbox"/> | I-9 Employment Eligibility Verification Form | Complete, Sign and Return with copies of valid forms of ID: (1) from List A or (2) from List B and C – see page 3 for instructions |
| <input type="checkbox"/> | W-4 Federal Tax Withholding Form | Complete, Sign and Return |
| <input type="checkbox"/> | M-4 State Tax Withholding Form | Complete, Sign and Return |
| <input type="checkbox"/> | Direct Deposit Form (Mandatory) | Complete, Sign and Return |
| <input type="checkbox"/> | Commonwealth of MA HR Contract Employee Disclosure Form | Complete, Sign and Return |
| <input type="checkbox"/> | MPTC Instructor Policies and Procedures | Complete, Sign and Return (signature page only) |
| <input type="checkbox"/> | MPTC Instructor Approval and Endorsement Form | Complete, Sign and Return |
| <input type="checkbox"/> | Massachusetts Deferred Compensation SMART Plan– Mandatory OBRA | Complete, Sign and Return all three pages |
| <input type="checkbox"/> | Social Security Administration 1945 Form | Complete, Sign and Return |
| <input type="checkbox"/> | Mass HR Employee Self Service Instructions | For Your Review – Do Not Return |
| | Certification(s): for office use only | Expiration Date: |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |